



2007 Annual Meeting Highlights for the AMA House of Delegates

Monday, June 25

# Doubling up on the Hill

AMA advocacy on two priorities—reauthorization of the State Children’s Health Insurance Program (SCHIP), which provides health coverage for low-income children, and preventing steep cuts in Medicare physician payments—is dialing up the pressure on lawmakers to pass legislation to protect the health of America’s children and seniors.

The AMA has strong champions in both the U.S. House and Senate for its positions and has generated significant momentum through congressional testimony, letters to policymakers, TV spots and ads in Capitol Hill publications, sending a message to Congress that the nation’s physicians will be relentless on these two issues until they are resolved. To build on this, delegates received a packet of advocacy materials in the House on Saturday that spells out the facts about SCHIP and the looming Medicare cuts, and provides a checklist of activities in which physicians and their colleagues can take part at the grassroots level.

Also, as part of a new program, delegates are asked to complete a form listing the members of Congress with whom they have a good working relationship. This will help focus targeted outreach efforts.

Leaders in the U.S. House plan to advance a single piece of legislation that would reauthorize SCHIP and prevent the Medicare cuts, starting with a 10 percent cut scheduled for Jan. 1, 2008. During the second week of July, two House committees are likely to begin voting on a bill that would reauthorize SCHIP, and the AMA is urging lawmakers to include provisions that would avert deep Medicare physician payment cuts slated for the next several years.

**Left Ad:** A doctor would tell this patient he's in trouble. 155/90 Blood Pressure 250. Too bad he may not have a doctor. Doctors will be forced to stop seeing Medicare patients if they can't cover the rising costs of practicing medicine. The government has failed to cover those costs for the last six years. Over 100,000 doctors have been suspended 10 patients out every year. It's time to stop the cuts and replace the Medicare physician payment formula with one based on patient needs. Medicare patients are depending on it.

**Right Ad:** This patient thinks she's healthy. A doctor would tell her she's not. 200mg/dl Blood Cholesterol 160/85 Blood Pressure 250 Cholesterol. Too bad she may not have a doctor. Doctors will be forced to stop seeing Medicare patients if they can't cover the rising costs of practicing medicine. The government has failed to cover those costs for the last six years. Over 100,000 doctors have been suspended 10 patients out every year. It's time to stop the cuts and replace the Medicare physician payment formula with one based on patient needs. Medicare patients are depending on it. AMA MEDICAL POLICY

These ads are part of the AMA's ongoing campaign on Medicare payment. The ad at right has been distributed on delegates' desks.

Now is the time for physicians to contact their legislators and urge them to reauthorize SCHIP and stop the Medicare physician payment cuts. Doctors should also encourage their patients to make their voices heard through the AMA's Patients' Action Network, which includes more than 1 million Americans whom the AMA mobilize to contact Congress.

>>Physicians' Grassroots Network: (800) 833-6354

>>Patients' Action Network: (888) 434-6200

## Tuesday's highlights

- House of Delegates Elections, 7-8:45 a.m., Normandie Lounge
- House of Delegates Session, 9 a.m.-3 p.m., International Ballroom
- Caucus on Violence and Abuse, 3-4 p.m., Lake Erie
- Action Team on Alcohol and Health, 3:30-5 p.m., 4M
- Presidential Inauguration, 5 p.m., Grand Ballroom
- Inaugural Reception, 6:30 p.m., Continental Ballroom
- Inaugural Dinner/Dance, 7:30 p.m., International Ballroom

## Outrageous fortunes?

Delegates who stop by the AMA Foundation booth and pick up a \$5 fortune cookie have the chance to discover a prize inside, such as a bottle of wine. Other prizes have included USB flash memory drives and a shipment of prime steaks.

# Medical clerkships examined

“What planet have I landed on today?”

That’s what medical students must ask themselves each time they begin a new rotation during their third and fourth years of school, according to researcher David Irby, PhD, who spoke at Friday’s session on implementing innovation in medical education.

His research team with the Carnegie Foundation for the Advancement of Teaching found that the discontinuity of bouncing between single-discipline rotations every few weeks places many medical students in a state of “perpetual confusion.” Meanwhile, he said, “Nobody knows their name.” The study also found that during the first two years of medical school, “no matter which school you look at, the basic sciences overwhelm everything else in the curriculum.”

Irby described how the University of California at San Francisco recently started a yearlong integrated longitudinal clerkship to provide a more authentic and effective clinical experience. In the program, eight medical students acquire a cohort of 50 patients who each are selected to target core competencies in a dozen disciplines. The students follow the patients wherever they go in the health care system, enabling them to observe the natural progression of disease and learn to manage chronic illnesses across settings, said Irby.

Harvard Medical School’s Malcolm Cox, MD, showed how early results of a study on a similar program, the Cambridge Integrated Clerkship, showed that the students in the clerkship had better educational experiences than those in conventional rotations.



Malcolm Cox, MD, said a yearlong clerkship in many disciplines is better for medical students than traditional rotations.

They felt better prepared to deal with ethical dilemmas, see how the social context affects patients and relate to diverse patient populations, he said.



## Special advice

Representatives from 50 specialties pitched in to share their insights at the AMA Medical Student Section’s Medical Specialty Showcase. Kristie Appelgren, a student at the Medical University of South Carolina, said she is pursuing a career in pediatrics because she sees it as “the ultimate in preventive medicine. The work you do extends into the future.” Shown here are (left) Ohio State medical student Alison Stanley with Linda Lawrence, MD, president-elect of the American College of Emergency Physicians.

# New caucus on disaster medicine takes shape

An informal discussion Saturday kicked off the formation of a national disaster medicine caucus, a group that could determine how health care professionals can most effectively respond to public health emergencies.

After a brief presentation by James J. James, MD, director of the AMA Center for Public Health Preparedness and Disaster Response, a packed room of delegates provided their input about what issues they’d like the caucus to address. Those ideas will be used to set the agenda for its next gathering at the Interim Meeting in Honolulu.

“There’s an opportunity here to create something good,” said Kenneth Mattox, MD, a surgeon from Houston. “If we leave our preconceived notions outside the door, this caucus will work.”

Delegates also explored copies of the AMA’s new peer-reviewed scientific journal, *Disaster Medicine and Public Health Preparedness*. The journal will be published once more this year and quarterly beginning in 2008. A copy of the premier issue was included in the non-official business bags distributed Saturday.

Delegates interested in getting involved in the caucus can stop by the Communications booth in the Continental Foyer to sign up.

